

AMENDMENT TO H.R. 1003 (ASSISTED SUICIDE  
FUNDING RESTRICTION ACT OF 1997)  
OFFERED BY MR. BILIRAKIS

Bill no.:	HLC HR 1003
Amendment no.:	# 1a
Date offered:	3/13/97
Disposition:	adopted, roll call 15-10

At the end of the bill, insert the following new section (and conform the table of contents accordingly):

1 SEC. 12. SUICIDE PREVENTION (INCLUDING ASSISTED SUI-  
2 CIDE).

3 (a) PURPOSE.—The purpose of this section is to re-  
4 duce the rate of suicide (including assisted suicide) among  
5 persons with disabilities or terminal or chronic illness by  
6 furthering knowledge and practice of pain management,  
7 depression identification and treatment, and issues related  
8 to palliative care and suicide prevention.

9 (b) RESEARCH AND DEMONSTRATION PROJECTS.—  
10 Section 781 of the Public Health Service Act (42 U.S.C.  
11 295) is amended—

12 (1) by redesignating subsection (e) as sub-  
13 section (f); and

14 (2) by inserting after subsection (d) the follow-  
15 ing new subsection:

16 “(e) RESEARCH AND DEMONSTRATION PROJECTS ON  
17 SUICIDE PREVENTION (INCLUDING ASSISTED SUI-  
18 CIDE).—

1           “(1) RESEARCH.—The Secretary may make  
2           grants to and enter into contracts with public and  
3           private entities for conducting research intended to  
4           reduce the rate of suicide (including assisted suicide)  
5           among persons with disabilities or terminal or chron-  
6           ic illness. The Secretary shall give preference to re-  
7           search that aims—

8                   “(A) to assess the quality of care received  
9                   by patients with disabilities or terminal or  
10                  chronic illness by measuring and reporting spe-  
11                  cific outcomes;

12                  “(B) to compare coordinated health care  
13                  (which may include coordinated rehabilitation  
14                  services, symptom control, psychological sup-  
15                  port, and community-based support services) to  
16                  traditional health care delivery systems; or

17                  “(C) to advance biomedical knowledge of  
18                  pain management.

19           “(2) TRAINING.—The Secretary may make  
20           grants and enter into contracts to assist public and  
21           private entities, schools, academic health science cen-  
22           ters, and hospitals in meeting the costs of projects  
23           intended to reduce the rate of suicide (including as-  
24           sisted suicide) among persons with disabilities or

1 terminal or chronic illness. The Secretary shall give  
2 preference to qualified projects that will—

3 “(A) train health care practitioners in pain  
4 management, depression identification and  
5 treatment, and issues related to palliative care  
6 and suicide prevention;

7 “(B) train the faculty of health professions  
8 schools in pain management, depression identi-  
9 fication and treatment, and issues related to  
10 palliative care and suicide prevention; or

11 “(C) develop curricula regarding disability *and implement*  
12 issues, including living with disabilities, living  
13 with chronic or terminal illness, attendant and  
14 personal care, assistive technology, and social  
15 support services.

16 “(3) DEMONSTRATION PROJECTS.—The Sec-  
17 retary may make grants to and enter into contracts  
18 with public and nonprofit private entities for the  
19 purpose of conducting demonstration projects that  
20 will—

21 “(A) reduce restrictions on access to hos-  
22 pice programs; or

23 “(B) fund home health care services, com-  
24 munity living arrangements, and attendant care  
25 services.

1           “(4) PALLIATIVE MEDICINE.—The Secretary  
2       shall emphasize palliative medicine among its fund-  
3       ing and research priorities.”.

4       (c) REPORT BY GENERAL ACCOUNTING OFFICE.—  
5       Not later than 1 year after the date of enactment of this  
6       Act, the Comptroller General of the United States shall  
7       submit to the Congress a report providing an assessment  
8       of programs under subsection (e) of section 781 of the  
9       Public Health Service Act (as added by subsection (b) of  
10      this section) to conduct research, provide training, and de-  
11      velop curricula and of the curricula offered and used by  
12      schools of medicine and osteopathic medicine in pain man-  
13      agement, depression identification and treatment, and is-  
14      sues related to palliative care and suicide prevention. The  
15      purpose of the assessment shall be to determine the extent  
16      to which such programs have furthered knowledge and  
17      practice of pain management, depression identification  
18      and treatment, and issues related to palliative care and  
19      suicide prevention.